

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**
(FOR USE WITH FORM PTO-875)

SERIAL NO.

10/581,281

FILING DATE

5-31-06

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1						
2						
3						
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48						
49						
50						
TOTAL IND.		↓		↓		↓
TOTAL DEP.		←		←		←
TOTAL CLAIMS						

	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
51				1 -		
52				1 -		
53				1 -		
54				1 -		
55				1 -		
56				1 -		
57				1 -		
58				1 -		
59				1 -		
60				1 -		
61				1 -		
62				1 -		
63				1 -		
64				1 -		
65				1 -		
66				1 -		
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100						
TOTAL IND.		↓	2	↓		↓
TOTAL DEP.		←	28	←		←
TOTAL CLAIMS			30			